



MARYLAND ASSOCIATION  
OF CHAIN DRUG STORES

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**SB64 – HIV Prevention Drugs - Prescribing and Dispensing by  
Pharmacists and Insurance Requirements  
Senate Finance Committee  
January 31, 2023**

**Position: Favorable with Amendments**

**Background:** SB64 authorizes pharmacists to prescribe and dispense Human Immunodeficiency Virus (HIV) postexposure prophylaxis (PEP) medication to medically qualified patients at-risk of contracting HIV.

**Comments:** The Maryland Association of Chain Drug Stores (MACDS) appreciates the opportunity to express support for SB64. We thank Senator Lam for introducing it and urge the Committee to approve this bill that will expand rapid access to groundbreaking HIV prevention medication for Marylanders. Successful passage will ensure Marylanders have patient-driven options to receive the timely care they need to prevent HIV infection and spread. Postexposure prophylaxis (PEP) can prevent an individual from contracting HIV after an encounter they believe may have put them at risk – but only if taken within 72 hours of the potential exposure.

**Increasing Patient Options to Get PEP in Time to Prevent Infection Will Save Lives**

HIV prevention has transformed in recent years due to the approval of PEP and other groundbreaking medications that prevent HIV infection. As one of the most frequently visited and trusted members of a patient’s healthcare team, pharmacists are highly trained medication experts that are readily available to safely screen, test, and provide PEP to patients safely and in their own communities. Nearly 90% of Americans live within 5 miles of a pharmacy and patients visit pharmacies 10 times more frequently than other healthcare providers.<sup>1</sup>

Because pharmacies are open in the evening and on weekends, they are unique in their ability to provide care to patients in underserved communities and to individuals that do not have a primary care physician. Even patients that do have a primary care physician may struggle to get an appointment within the first 72 hours after exposure and would benefit from medication access through their local pharmacy. Pharmacy hours of operation align with providing life-saving care, filling a much-needed gap in the healthcare system.

Pharmacists who practice in the 13+ states that permit them to initiate PEP therapy are highly educated with 6+ years of doctorate level education. Their education and training not only makes them experts on pharmaceuticals, it also includes a focus on patient assessment, following protocols, and making referrals to physicians when called for.

When providing PEP therapy to patients, pharmacists follow the same CDC protocols and consult the same clinical guidance as other medical practitioners. They are well aware of side effects and the need for testing and identifying patients that may not be candidates for certain drugs due to health conditions or other complicating factors when assessing patient eligibility for these medications. If a patient is not eligible for treatment at the pharmacy, they will be counseled to seek immediate care elsewhere. Additionally, Maryland pharmacists already have the authority to provide the point-of-care testing services that are needed to support provision of these treatments. For more extensive testing, pharmacies may partner with local labs. Pharmacy providers' ability to efficiently conduct and facilitate access to these testing services was clearly demonstrated during the COVID-19 pandemic.

Among Marylanders living with HIV in 2019, it was estimated that nearly 90% had been diagnosed, while an estimated more than 3,500 individuals remain undiagnosed.<sup>ii</sup> Recognizing the critical nature of timely access to PEP, Maryland should act quickly to join the 13 states, including our neighbor Virginia, that have already acted. SB64 would allow Marylanders the same benefit and would expand access for those who may not have the resources to seek care elsewhere or who have sensitivity about seeking care at other venues due to the stigma that still exists around HIV.

## **Recommended Amendment**

- 1. Transition the requirement that financial assistance information be covered in pharmacist training programs to a requirement that financial assistance information be maintained by the pharmacy and provided to the patient during the consultation.**

Financial assistance information and discount programs are regularly available for many prescription medications, and providing this information to patients is already a routine practice in the process of dispensing HIV prevention and other medications. Pharmacies know how to keep this information up-to-date and readily available. Many existing training programs for the access and use of PrEP and PEP do not include specific financial assistance information, and this information is not required to be covered in training for pharmacists practicing in our neighboring Virginia. The process of updating the content for the existing programs may unnecessarily delay the offering of this service and impede patient access. Many Maryland pharmacists have already completed HIV therapy training programs and are ready provide this life-saving service. Patient access should not be delayed while Maryland pharmacists potentially have to re-take and pay for a second training program only to be taught information they already have at hand. Rather, we ask that you remove the requirement that approved training programs include financial assistance content and add a provision that requires pharmacies to maintain and share financial assistance information with patients during consultation.

## Conclusion

As demonstrated during the COVID pandemic, pharmacies are critical partners in providing access to care, especially in rural and underserved urban communities. Pharmacies' convenience and integration in communities across the state, their doctorate-level clinical training, and their ability to fill gaps in the healthcare system to give patients access to supportive care measures make them uniquely qualified to provide HIV prevention services. MACDS strongly support passage of SB64 with our recommended amendment to provide vulnerable Marylanders who are at risk of contracting HIV with the option to receive the care they deserve in the setting of their choice. Every 72 hours counts.

Thank you for your consideration.

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<sup>i</sup> \*studied in Medicaid patient population\* Hemberg N, Huggins D, et al. Innovative Community Pharmacy Practice Models in North Carolina. North Carolina Medical Journal. June 2017.

Available at: <http://www.ncmedicaljournal.com/content/78/3/198.full>

<sup>ii</sup> <https://health.maryland.gov/phpa/OIDEOR/CHSE/SiteAssets/Pages/statistics/Maryland-HIV-Fact-Sheet-2021.pdf>